## It's a fact!

**Falls are the leading cause of fatal injuries** among senior Canadians and account for more than half of all injuries among seniors.

Falls are the most preventable risk to health among senior Canadians.

- Approximately 30% of community-dwelling Canadian seniors experience at least one fall each year.
   (O'Loughlin, J.L. et al. 1993. Incidence of and risk factors for falls and injurious falls among the community-dwelling elderly. *American Journal of Epidemiology*, 137(3), 342-354.)
- Seniors' falls result in a loss of independence. In 1998/99, there were 68,897 injury admissions in the senior population accounting for 35% of all injury admissions. Seniors are more likely to be admitted to hospital from an injury as a result of a fall than any other age group. In fact, over half (56%) of all admissions due to falls occurred in persons 65 years of age or over. (Canadian Institute for Health Information. *National Trauma Registry report, hospital injury admissions, 1998/99*. Ottawa: the Institute, 2001.)
- In 1997, falls accounted for 20% of all injury deaths among adults age 65 or over. (Computations by Injury Section, Health Surveillance & Epidemiology Division, CHHD, PPHB, Health Canada. Analysis of Statistics Canada 1997 mortality data.)
- Nearly half of all injuries among seniors take place at home. Constructional features of a house or building such as floors, stairs and steps are identified more often in an injury than any household product.
   (CHIRPP Injury Reports. *Injuries associated with falls in seniors*. Summary Data for 1997. Computations by Injury Section, Health Surveillance & Epidemiology Division, CHHD, PPHB, Health Canada.) (*Identification of consumer products causing injury and death to seniors*. Final Report Submitted to the Product Safety Bureau, Health Canada by Valerie Howe, Prospect Consulting, March 1996.)



• Injury death rates rise steeply with age. In 1997, the injury death rates among those 65-74 were 51.6/100,000 and 455.6/100,000 among those over age 85.

(Statistics and trends. Prepared for the Canadian Conference on Injury Prevention and Control by the Alberta Centre for Injury Control and Research, 2000.)

- Seniors who fall face a greater risk of permanent institutionalization than those who do not. According to one study, the odds of entering into care following an injurious fall was nearly triple the odds for people who had not fallen. (Wilkins, K. Health care consequences of falls for seniors. *Health Reports*. 10(4) 1999, Statistics Canada)
- In the one-year period from June 1996-97, thirty-seven per cent of veterans experienced one or more than one fall. Seventy-five per cent of veterans age 75 or older experienced an injury related to a fall. As for the oldest group, they tend to indicate more severe injuries such as loss of consciousness, sprains or fractures.

(Computations by Micheline Charest, Planning and Negotiations Coordinator, Veterans Affairs Canada. From Table HS7A, *Veterans care needs survey*, Statistics Canada, 1997. Cat. no 89-554-XPE.)

• It is estimated that about 40% of falls among seniors which result in a hospital stay are attributable to hip fractures. Hip fractures are the most common type of fall injury among seniors and it is expected that the number of annual hip fractures among seniors will increase from 23,375 in 1993 to 88,214 by the year 2041.

(The Hygeia Group. The economic burden of unintentional injury in Canada. Smartrisk, 1998.)

• It has been estimated that the annual direct health care costs of falls is \$2.4 billion. Caring for seniors injured from a fall represents 41% of these costs or \$1 billion.

(The Hygeia Group. The economic burden of unintentional injury in Canada. Smartrisk, 1998.)

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